Quality Workplace Program
Process Evaluation Summary

Context

The Quality Workplace Program (QWP) was established to address retention of professional nursing staff in Saskatchewan through exploring the attributes of quality workplaces or magnet environments for nursing. The program was intended to improve patient outcomes, nurse outcomes, and systems outcomes through quality improvements in nursing workplaces. The QWP was initiated at three pilot sites and one control site.

The Health Services Utilization and Research Commission (HSURC) has an agreement to evaluate the Saskatchewan Registered Nurses' Association (SRNA) Quality Workplace Program (QWP) pilot project. The Provincial Nursing Council Working Group on Magnet Environments is acting as advisor to the evaluation. The purpose of the overall evaluation is to determine the effectiveness of the QWP in three pilot sites and one control site in Saskatchewan, including both process and outcome components.

Process Evaluation

Process evaluations, in general, answer the questions: What happened during the program implementation? What components were valuable? What could be improved?

The activities of the QWP process evaluation included interviews with the QWP facilitator and 20 staff across the three sites, some who were working group members and some who were not. The interviews took place within six months after the program had begun, following the end of the facilitator's formal involvement with each site working group. As well, evaluators reviewed working group documentation and observed feedback meetings with the site working groups.

Findings

Interview participants from all three sites had many positive comments about the impact of the program. They noted there was better communication between staff, between management and staff, and between departments. Management involvement in the program helped the staff to see them as more approachable, and as part of the team. The staff shared a growing sense of empowerment, a feeling they had a voice and could make decisions. They began taking actions to solve problems. Many interview participants noted the morale in their workplaces had improved.

The process evaluation identified the characteristics that helped the QWP to succeed. The perception of the program as a positive step was one key; staff viewed the program as a way to improve the workplace for both patients and staff. The alternate dispute resolution training (ADR) gave the working group a common foundation on which to build. The ADR, along with the trained facilitator, provided a mechanism for working through group dynamics, such as, setting rules for conversation to make sure everybody had a chance to speak and to listen. Also key were having an external facilitator, management support, and representation from all staffing categories on the working group.

Challenges—personal, practical, process, and organizational—were also identified. Working group members were challenged to overcome scepticism, and to sell the changes inherent in the

program to other staff. Practically, there was a feeling that there were lots of meetings and pressure to produce results in a short time frame. The process issues included lack of clarity in goals, uncertainty about how working group members were selected, and feelings of impatience with the time spent on identifying issues rather than coming up with quick solutions. Organizationally, there were sometimes struggles to work as a team—between different levels of staff, between newer and older staff, or between staff and management.

The process evaluation yielded useful confirmation about the key components of the program. The model embodies community development principles—enhancing the capacity of front line staff to identify shared problems, and to cultivate the resources, skills and commitments to implement solutions. Other key components for success are the commitment of the working group members, a skilled facilitator, and the alternate dispute resolution training.

The process evaluation also highlighted some of the challenges involved in improving work environments. While the QWP brought about change, change can often be uncomfortable. Each working group needed to remember its collective vision for change and to communicate it repeatedly and in a variety of ways with other staff. The program encouraged staff to take responsibility for leadership. This role was sometimes difficult to accept and develop—for both management and staff—as their workplaces typically used a hierarchical management style. As working group members became more comfortable in their roles, they needed to help other staff feel as though they were part of the team by involving others in specific tasks, activities, or decisions. Doing so is helping to expand the program from a 'working group experience' to a 'unit experience' and beyond.

Conclusion

The current approach of the Quality Workplace Program (QWP) is strong and appears to be having a positive impact on the pilot site workplaces. Although building quality workplaces does not necessarily mean the introduction of an additional 'program' or 'initiative,' the approach taken by the QWP supports an organization's cultural change—an essential contributor to sustainability.

As a result of the process evaluation, we recommend the QWP become informed about transitions between old and new, promote leadership, and build on its strengths. The process evaluation report describes specific opportunities to change and improve the program.

Recommendations

Based on the opportunities for program change, the following recommendations address activities currently underway which need to be strengthened and also propose new activities to address gaps. The recommendations include lead responsibility (in bold font) for ensuring implementation and facilitating partnership with others interested in moving in the same direction; the list of partners is meant to be inclusive and the omission of any interested organization(s) is unintentional.

The evaluators recommend that:

1. ***Saskatchewan Health*** develop a broad interdisciplinary approach to supporting quality workplaces in health. Nursing is a large component of the health system and was a natural starting group. Building on the success and momentum with this group, a system framework should include a vision that encompasses different disciplines and at the same time appeals to front line staff.

   Saskatchewan Health work with partners and site formal leaders (e.g., board members, CEOs, managers, union leaders) to define and clarify roles in moving quality workplaces forward, and to develop an accountability framework to measure this movement.

2. ***QWP funders and partners, and site formal leaders*** provide consistent information and messages to each other and to staff, and that site formal leaders (e.g., board members, CEOs, managers, union leaders) demonstrate support for the QWP through continuous formal and informal communication with staff, before and during the 'formal' program implementation.

   Site formal leaders monitor and report on the quality of their workplaces based on the accountability framework recommended above.

   QWP Evaluators (internal or external) share evaluation information (e.g., methods, data interpretation) with working groups in a timely manner.

3. The ***Quality Workplace Program*** integrate the following elements into each site. In addition, we encourage a realistic, step-by-step approach to integrate the summary findings detailed in the "opportunities" section of the evaluation report.

   The ***QWP***:

   - ☑ Provide the facilitator with education in the areas of participatory action research, community development, and facilitation.
   - ☑ Expand the working group education to include change and change/transition management, participatory action research, and group dynamics, in addition to alternate dispute resolution.
   - ☑ Explore options for developing program capacity to deliver education (e.g., ADR trainer in SK Justice devoted solely to QWP, 'train the trainer' or peer training model to have site staff able to deliver education across sites, a QWP staff person responsible for education).
   - ☑ Identify expected outcomes of the program and link them to program activities (i.e., an expected chain of events, 'if we do this then we expect this to happen').
   - ☑ Evaluate changes one year following the end of the 'formal' implementation phase.
   - ☑ Build a network of groups and individuals interested in quality workplaces. One approach might be to explore the possibility of an interactive resource (web-based if technology is

accessible), that can be contributed to as the groups progress, that each working group can update on a regular basis and report on their action plans and their indicators of success. This resource can be used as a guide to the steps that were followed by other groups, but not as a recipe book.

- ☑ Demonstrate value for employee participation through methods such as staff replacement or paid time.

The ***QWP Facilitator***:

- ☑ Maintain regular contact with site formal leaders throughout the duration of the program.
- ☑ Identify others working with similar skill sets (i.e., community development workers, health promotion workers) and set up a QWP support network or join other existing networks (e.g., HP-Link, Community Development Society of Saskatchewan, etc.), in order to brainstorm, problem-solve, and share learning.

The ***QWP Working Groups***:

- ☑ Broaden their membership to include disciplines other than nursing. The working groups will need to seek ways to interact and communicate with the various disciplines other than nursing in order to retain a reasonable, workable number of people on the core working group (e.g., sub-committees, buddy system).
- ☑ Identify short and long term strategies, indicators of success, and develop a plan for evaluation.
- ☑ Have regular in-person meetings with site formal leaders.
- ☑ Build relationships with site contact people for union and senior management.
- ☑ Communicate regularly with the rest of the staff, in-person and in writing, formally and informally.
- ☑ Share their learning with other site working groups during and after the 'formal' program.

For more information on the Quality Workplace Program Evaluation or for a full copy of the process evaluation report, please contact Tanya Dunn-Pierce, Project Leader, Health Human Resources Project, Health Quality Council, at (306) 668-8817 or tdunnpierce@hqc.sk.ca.